ALLOWANCE HOT LIST

Appl. No. Examiner-T	09/113770	Prepared by Date	(Ma)		
JACKET: VES NO VES NO	Primary Examiner box complete. Issuing Classification complete.				ALABIT CODY
PTO-892/I VES NO VES NO	449: Examiner's initials or cross-through Date(s) supplied/complete on all P	h lines supplied for TO-1449/892 sheet	each item cited s. (Month and y	by applicant. year required.)	
SPEC: (YES) NO YES (NO	Brief Description of Drawings i Continuing data is mentioned in	ncludes description 1 st paragraph. (Car	of each figure in the an insert.)	n drawings.	
CLAIMS:		· · · · · · · · · · · · · · · · · · ·			·
YES NO	Claims listed on Notice of Allowa Claims correctly numbered in ind (No duplicate or missing (No incorrect dependence)	ex. g claim numbers.)	d claims and/or	index of claim	ıs.
CRFE: YES NO	If necessary (biological sequence	e listing).			

NOTICE-OF ALLOWABILITY: